

Testimony for White House Conference on Aging Listening Session  
December 8, 2004  
Chicago, IL

Topics Addressed:

Economic Security Policy  
Mental Health and Aging

Presented by:

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### Organizational Description:

The Retirement Research Foundation has invested nearly \$155 million over 25 years in efforts to enhance the quality of life of Older Adults. Endowed in 1978 by the late John D. MacArthur, we remain the nation's largest private foundation working exclusively in aging. With over 400 formal requests for funding received annually, staff have a strong vantage point from which to remain current on where progress is taking place and where change is needed.

We applaud the planning committee for the comprehensive and timely agenda it has laid out for the 2005 White House Conference on Aging. We thank you for the opportunity to share with you recommendations on two specific issues our Foundation respectfully urges focused attention to by Conference delegates in their reports to the Administration and Congress next year.

## **I. Assuring Economic Security in Old Age.**

**Position:** Economic well being of future cohorts of older adults will be determined by numerous factors. Our pension system is failing. Health care costs continue to outpace cost of living adjustments under Social Security, despite the controls competition is supposed to produce. Most younger adults do not understand the cost of long-term care or how to plan for retirement. And as workforce shortages loom for every sector of the economy, early retirement continues – despite the tangible contribution of longer work to retirement security. In the view of many, shoring up Social Security, while important, is the least of our worries. Recognizing that a comprehensive package of reforms, while preferable, is unlikely, The Retirement Research Foundation recommends:

- conferees to request that Congress act immediately on pension reform and develop programs and incentives to keep people working longer.
- incremental reforms to Social Security combining income raising and payout slowing options that research documents can secure the system's long-term solvency; we strongly oppose introducing private accounts at any level.
- that any reform of Social Security or other policies affecting economic security for older adults not adversely affect the most vulnerable seniors -- low-income women.

## **II. ISSUE TWO: Mental Health and Aging**

**Position:** Promoting mental health awareness and treatment for depression and anxiety among older adults should be a priority recommendation of the Conference:

- **THE PROBLEM IS PERVASIVE.** Conservative estimates are that 20% of older adults, **7 million seniors**, suffer depression or anxiety today, a figure that will more than double to **15 million in 2030**.
- **EMOTIONAL DISORDERS INCREASE THE RISK OF, AND WORSEN THE IMPACT OF PHYSICAL ILLNESS.** Older persons with anxiety or depression are three times more likely to suffer a stroke or heart attack than are peers with equivalent physical health characteristics. Conversely, older persons undergoing heart surgery or who suffer a stroke have a high incidence of depression. In addition, chronic stress hastens aging. In a recent study, the cells of parents with chronically ill children died at a faster rate and were more dysfunctional than the cells of similar adults whose children were healthy.
- **MENTAL HEALTH CARE FOR OLDER ADULTS IS COST-EFFECTIVE.** Pharmacological and non-pharmacological treatments have been shown to work. More importantly, recently completed clinical trials found that treating emotional conditions in older adults reduces subsequent use of far costlier emergency room and inpatient care. Both telephone-based interventions and interventions bringing mental health expertise into primary care practices, have been shown to be cost-effective.

#### Recommendations:

On January 24, 2005, Conference Advisors will hear testimony in Washington from the National Coalition on Mental Health and Aging. The Retirement Research Foundation hereby supports the recommendations of this group. Recognizing that the list they offer is lengthy, The Foundation has identified five issues, and added one of its own, which we specifically recommend conferees request Congress and the Administration to address:

1. Follow the recommendation of the President's 2003 New Freedom Commission on Mental Health and fund a national public awareness campaign, targeted at older adults, to reduce the stigma of mental illness and encourage people to seek care.
2. Guarantee parity in coverage/reimbursement for emotional and physical disorders.
3. Mandate that by 2010, all internal medicine and family practice residency programs receiving Federal funds include training on, and/or require competency of graduates in fundamentals of geriatric psychiatry.
4. Provide incentives for states to revise licensing and continuing education requirements so that training in geriatrics is mandatory for all licensed health, mental health and social services professionals.

5. Address the epidemic of depression in nursing home settings, estimated to be at least 50%, by:
  - requesting that CMS comprehensively revise nursing home regulations such that routinely used demeaning or dehumanizing practices are listed explicitly as violations punishable by monetary penalties;
  - request CMS to develop waiver programs allowing states to enable and encourage providers to change nursing home practices so that they increasingly promote dignity, autonomy and meaningful engagement for residents in accordance with the Nursing Home Reform Act of 1987; and
  - provide CMS with funds needed to train surveyors in all 50 states on the revised regulations.